

LOUISVILLE MEDICAL NEWS.

"NEC TENUI PENNA."

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EDITORS.

THE FEE QUESTION AGAIN.

The time comes again when the question of fees for medical teaching takes its annual rise. Its downfall heretofore has been ascribed to the fact that the schools had committed themselves by the spring circular to ancient fees, so that reform had to be postponed a twelvemonth. We trust this accident will not occur this year. All sorts of warnings were given last spring, upon the heels of promises for the better, that with the close of the session of 1879-80 the great question which would be brought before the schools would be the increase of price for tickets.

We have been over the arguments in favor of reform in this matter so often that we dare not repeat them at length, and indeed the thing is so patent that we hardly think we should better the cause by harping on it. The dignity of medical teaching demands that the pittance now required by the majority of the schools should be changed for something more respectable. The good of the students demands that proper prices should be paid to insure proper teaching, and the profession demands that the invitation to every one in the country having no money to engage in other pursuits to enter the profession of medicine be withdrawn at once.

About fifty per cent, we believe, was the price generally agreed on last year to take place this spring, but we trust that if there is any school which wishes to exceed that

amount it will not hold back. The times are propitious in every way for advance. The "boom" of returning prosperity which struck commerce some months ago will certainly reach us before many months are gone. Those who study medicine in 1880 certainly have more money than the students of 1879. It is pleasant to hear, too, that we have practical demonstration of the fact that advance in fees does not lessen the income of the schools, for these are but mortal and will ever continue to listen to their material interests first. The experiment which was tried last session in Cincinnati we hear has been eminently a success, and we have no reason to believe that the good fortune which attended the venture there will not follow it elsewhere in the Mississippi Valley. We trust by all means that immediate steps will be taken to organize the advance in the South and West.

THE Massachusetts Medical Society is apparently ever on the alert to protect the profession and people against the *hog*. It has arrayed a lot of spurious schools before the Massachusetts legislature on the ground of selling diplomas. The following is the sweet-scented list: American University of Medicine and Surgery, of Philadelphia; Philadelphia University of Medicine and Surgery; Physio-Eclectic Medical College, of Cincinnati, O.; Physio-Medical College (new issue), of Cincinnati; American Eclectic Medical College, of Cincinnati; St. Louis Homeopathic Medical College; St. Louis Eclectic Medical College; New England University of Medicine and Surgery, of Manchester, N. H.; University of Medicine and Surgery,

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of Haddenfield, N. J.; and American Vithopathic College, of Cincinnati, O.

The hearing, says the correspondent of the press, was one of the most crowded of the session. Doctors of every description, long-haired wretches whose looks would hang them, clairvoyants, healers of all shades were on hand to oppose the law to restrict their business. They looked like a collection of snakes and owls protesting against being disturbed.

We ask the attention of our readers to General Hood's History of the War, advertised in the NEWS. This is not a medical matter, but we are sure our friends will not object to our speaking of it in the NEWS. General Hood, a gallant soldier, who lost a leg in the late war, who had an arm entirely disabled, and who received several other wounds, died of yellow fever last summer in New Orleans, and his wife died of the same disease at the same time. They left ten children, the oldest not much more than ten years old. A large number of our readers took part in the late war upon one side or the other, and we have no doubt General Hood's book will therefore be exceedingly interesting to them.

DR. GEORGE T. ERWIN.—We neglected to mention, in connection with the report of the meeting of the Central Kentucky Medical Association, which appeared in a late number of the NEWS, that Dr. Erwin, of Danville, has kindly consented to report for us regularly the proceedings of this very excellent association. Dr. Erwin is well known to the profession of Kentucky as one of its most graceful writers, and one of its most earnest, ambitious, and accomplished members. The Central Kentucky Medical Association contains many of the best men in the state, wise and skillful physicians and surgeons, and the proceedings of this society are always valuable and instructive. We are very fortunate in securing Dr. Erwin's services.

Original.

A CARCINOMA OF THE BREAST.

REPORTED BY E. J. KEMPF, M. D.

Mrs. B., aged sixty-five, a very corpulent and stout-looking woman, presented herself at Dr. M. Kempf's office in the fall of 1877, complaining of a painful tumor of the left breast. It was diagnosed a scirrhus tumor, because it was hard, immovable, sensitive to pressure, and accompanied by an occasional sharp, lancinating pain. An immediate removal of the tumor was advised, but this the patient refused.

In the spring of 1878 the lady requested what before she refused—a removal of the tumor, for the reason it was getting larger and more painful. The tumor of the breast, about as large as a goose-egg, and a smaller tumor toward the axilla, and seven enlarged lymphatic glands in the axillary space, were removed by Dr. M. Kempf, assisted by Dr. Knapp and myself. After taking out the enlarged glands, Dr. Kempf felt another gland at the apex of the axillary space and not within reach, unless a counter-opening be made above the clavicle in the supra-clavicular space. This Dr. Knapp did not agree to, because it was dangerous, and because it would do no good, as the enlarged glands were only a symptom of a cancerous cachexia.* The wound from which the tumors and the lymphatic glands had been removed was closed with sutures, all hemorrhage having been controlled. The wound healed by first intention.

Three months after the operation the tumor had reappeared in the breast. Nodules (enlarged lymphatic glands) could be felt in the axillary space, and the arm commenced to swell. This swelling was due to the glands pressing on the axillary nerves, and not on the vein, because the swelling was not edematous, and not upon the artery, because the swelling was not gangrenous.† Bluish and yellowish spots appeared over the shoulder and the breast, and reddish pimples over the latter. The patient also complained of a great pain on the right hip-joint, and of a feeling "that the leg would *break* some day." No tumor or swelling or tenderness could be discovered. Laudanum and mor-

* In the LOUISVILLE MEDICAL NEWS of April, 1878, I reported a case in which eleven enlarged lymphatic glands were removed. The case proved fatal.

† This is theoretical, and not in accordance with the idea of Drs. Kempf and Knapp, who believe the swelling was due to the glands pressing on the vein.

phine were given to ease the patient's way to the grave.

January 7, 1880, while getting into bed, the patient put her whole weight upon the right leg, when she sank back into the arms of her son, saying, "My leg is broke." She was placed upon a lounge and I was sent for. I diagnosed the fracture intra-capsular, but, thinking nothing could be done, Dr. Knapp was sent for. Dr. Knapp agreed to the diagnosis, but thought the fracture was of the shaft of the femur below the trochanters, and advised extension of the limb by weight and pulley. The patient was given tonic doses of quinine and hypnotic doses of morphia, and her urine was drawn off every morning. It was bloody and thick, as if mixed with mucus or pus. About once a week the patient was redressed, and her back was washed with whisky and water to prevent bedsores. They, however, appeared. Benzoated-zinc ointment was applied to them. In this manner the patient lingered until February 10th, when she died.

Fracture of the femur, if due to cancerous infiltration of the femur, is unique; and we asked for a post mortem, but it was refused.

FERDINAND, IND.

Obituaries.

DR. JOHN JOSEPH O'REILLY.

It is with deep pain that we record the death of Dr. O'Reilly. Of Irish extraction, the son of a father of superior mind, and of a mother conspicuous for all the qualities that constitute the highest type of womanhood; a man of the truest courage and of intellectual brilliancy seldom surpassed; gentle, courteous, and generous; learned and skilled in his profession; a fluent writer and a ready debater; he was a rare good man, whose death brings sorrow to many hearts. He is mourned not only by his worthy wife and noble mother and beautiful daughters and devoted sisters and brother, but by an extensive clientele, who looked on him and believed in him as the best and wisest of doctors and as the tenderest and truest of friends.

Dr. O'Reilly died in his thirty-eighth year, on February 14th, during a visit to Texas. He was born in Philadelphia, reared in Kentucky; received his medical diploma from University of Nashville, served with credit as assistant surgeon in the Union army in

the late war; was Professor of the Diseases of Children in the Kentucky School of Medicine; was a member of the city Board of Health, trustee of the public schools, and an esteemed contributor to the American Practitioner and other medical periodicals. His handsome face, graceful, manly form, musical voice, and gentle words and ways will long live in the hearts of those who loved him, and their name is legion. May he rest in peace.

Books and Pamphlets.

MALIGNANT DEGENERATION OF A FIBROID TUMOR OF THE UTERUS. Large False Aneurism in the Substance of the Growth. By Drs. Albert N. Blodgett and Clifton E. Wing, Boston.

This rare and interesting case is the subject of a most instructive essay. We extract the following, with which it concludes:

In these days of operative interference the full history of such a case, left to run its natural course, is interesting, particularly so in this instance, on account of the rare conditions revealed by the autopsy. In former times uterine fibroids were pretty generally looked upon as of a malignant nature and confounded with "cancer," especially when they grew to very large size. More lately, since their benign character has been understood, many distinguished authorities have held to the opinion that they were never the seat of primary malignant degeneration, and there has been considerable discussion on this point. At present, although the possibility of such degeneration is generally accepted, its rareness is denied by no one. There are but few well-authenticated cases upon record. From the post-mortem appearances in this case there seemed no doubt that the primary change began in the uterine mass, the changes found elsewhere being secondary in character.

The finding of the false aneurism in such a growth was entirely unexpected. That it should have attained such a size when its walls were formed of firm, dense, uterine tissue is remarkable, and only to be explained by remembering that the principle of hydraulics utilized in the hydraulic press must have come into play here up to the time of the coagulation of the effused blood.

On abdominal palpation after death, I was surprised to feel the large mass formed by the aneurism, supposing at the time that it was an irregularity of the fibroid, and wondering why, in feeling of the tumor in my examination some months before, I had not at once detected it, as then there was apparently no water in the abdominal cavity, and the surface of the growth could be plainly felt. On explaining to an intimate friend of the deceased, who was with her constantly during her sickness, what was found at the autopsy, she at once asked if the aneurism would not account for the fact that the pain was always worse on the right side, and told me that the patient, during her sickness, often spoke of a strange "swashing" sensation at that point, saying that that was the only word which seemed to at all express the feeling. It

therefore seems likely that the aneurism formed, and became filled with the clots found in it, during her last illness.

It is also worthy of notice that, with such a large, irregular fibroid, the woman never suffered with dysmenorrhea; the menses were regular; metrorrhagia never occurred. Notwithstanding the encroachment on the caliber of the rectum, there was never constipation, and in spite of their position between masses of the growth, the ureters were not obstructed and the kidneys remained healthy.

It is interesting to consider what might have been the result if, previous to her last sickness, an attempt had been made to remove the uterine mass by the operation of hysterotomy, made popular of late years by the publication of the treatise of M. Pean, of Paris. The fact that with the exception of the tuft noted by Dr. Blodgett in his autopsy record, and which might have been easily separated, there were no adhesions *above the pelvis*, would very likely have induced the operator to go so far in attempting to separate those found *in the pelvis*, that before he was convinced the operation was not feasible, he would, perhaps, have inflicted an amount of damage incompatible with the recovery of the patient.

Again, supposing that the operator had succeeded in separating the pelvic adhesions, that portion of the growth which intruded upon Douglas's cul-de-sac lay so much lower in the pelvis than did the ureters, and the latter were in such intimate relation with the mass, that one or both of them might easily have been injured in the removal of the tumor.

This latter danger is not an imaginary one. I have myself seen the accident happen at the hands of a well-known operator. The case is reported in the American Journal of Obstetrics for August, 1876, but no mention is made of the autopsy or this fact disclosed by it. In this case the tumor weighed fifty pounds, and was of such rapid growth that it was at first thought to be ovarian. As in the case we report, there had been little or no leucorrhea, no dysmenorrhea, and, up to its cessation, one year before, perfect regularity of the menstrual function. The flow, however, had usually lasted but three days, and been scanty during that time. The patient's sufferings arose simply from the weight of the tumor. She was able to walk about, had a good appetite, and good digestion.

At the operation there were found pretty general adhesions at the upper part of the growth, which were easily separated. Luckily, there were no firm adhesions in the pelvis. Finally, the mass having been raised by assistants, the pedicle, consisting of the vagina and adjacent tissues, was ligated and cut, and the tumor removed. The patient, after rallying from the operation, soon began to show symptoms of internal hemorrhage, and next day the abdomen was again opened, cleansed of much effused blood, and a vessel, which had been torn in separating adhesions, was found bleeding and tied. The patient being very low, transfusion was attempted without result. The next day transfusion was again done, but with no perceptible effect, and the patient died.

At the autopsy considerable effused blood was found in the abdominal cavity, probably having come from other vessels torn in separating adhesions. A loop of the left ureter was found included in the ligature which had been tied about the upper part of the vagina. The ureter above the part was very much distended, and the corresponding kidney in a state of acute disintegration.

The operator, Dr. Thomas, in the last edition of his well-known text-book, mentions the case twice in the chapter upon uterine fibroids. At one place, in speaking of the size to which such tumors grow, he simply states, without further particulars, the fact that he has "removed one with uterus and both ovaries" weighing fifty pounds. Twenty pages further along, a foot-note to a table of statistics in which the case is tabulated as fatal, gives the same information. There is no reference to the injury to the ureter, nor is the liability to this accident included in his mention of the dangers of removal of fibroid uteri by gastrotomy. Thus the only particularly instructive point about his case is not brought out. Curiously enough, the chapter closes with the sound remark, "gastrotomy should be performed only when life is in jeopardy."

The Louisville Medical News.

Back numbers of the LOUISVILLE MEDICAL NEWS, with several exceptions, can be supplied. The price is six cents per copy, postpaid. Persons wishing to complete their files of the NEWS would do well to order missing numbers early, as but few copies remain of several of the issues.

A limited number of bound volumes of the NEWS is in stock. These can be obtained at the following prices: The NEWS for 1876, Vols. I and II bound together, \$3.50; 1877, Vols. III and IV bound together, and 1878, Vols. V and VI bound together, each \$4.50, or the three years for \$11.00, postpaid.

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Pharmaceutical.

ELLIOTT'S SADDLE-BAGS.—Among our numerous friends and patrons there are many who find the saddle-bag a necessity, and to these we desire to say a word on this subject. The Elliott bag has been upon the market a number of years. Its sale has increased each year, and has far surpassed that of any other bag yet offered to the profession. As evidence of their superiority, the U. S. Government has recently ordered one hundred pairs of them, after investigating the merits of all others. One of the great advantages it has over any other bag is that it is made of one piece of leather (either black or fair), and is put together with copper rivets. It has no seams or stitches exposed to the weather, and consequently as regards durability it can not be equaled by any bag that is otherwise made. Mr. A. A. Mellier, of St. Louis (the owner of the patent), has reduced the price from what it was originally, and offers the Elliott saddle-bags quite as cheap as any of the old-fashioned ones. Simon N. Jones, No. 2 Jefferson Street, is the agent in

this city, who will furnish any information in regard to them, and will forward them by express to any address upon receipt of price. The advertisement appears elsewhere in this journal.

Miscellany.

CONSANGUINEOUS MARRIAGE.—M. Godet reported to the Medical Society of Rheims (Michigan Medical News) some interesting facts bearing upon the question of consanguineous marriage. Of nine children born to an uncle and a niece who had united themselves in matrimony, two died at an early age, four are deaf mutes, one is an epileptic, while only two are healthy.

This is certainly a very fearful showing, but the case as it stands is a very imperfect argument against close intermarriage. It is lacking in certain elements which are necessary to make it strong evidence against consanguinity in the marriage relations.

Reasoning from the analogies furnished by the inferior animals, there is nothing injurious *per se* in blood relationship of parents; that is, in its effects on the physical constitution of the offspring. These analogies, so far from showing the relationship to be disastrous, demonstrate that it may be made positively beneficial. The breeders of fine stock understand this, and some of the finest strains are the result of in-and-in breeding. Instances are by no means wanting in which able men, and physically stalwart, are the children of parents between whom there existed a blood-relationship. With these facts before us it becomes necessary to look further than to the mere fact of the legally—and morally too—incestuous marriage for the cause of the disastrous results in the case cited. It would have helped to a solution if the reporter had given us some facts regarding the peculiarities of the parents. Was there an inherent tendency in each to any neurosis? Was there any constitutional taint common to each? These coincidences are liable to occur between parents ununited by any blood-relationship, and when they do occur the offspring of the union suffers. The same law applies to the better qualities of mind and body. The children of parents in whom there is a common genius will inherit that genius in an intensified degree. Stock-raisers in propagating "points" select for mating a male and female which have each the particular "point" sought. The

feathering of a bird can be regulated with an almost mathematical certainty by the selection of the male and female. The patriarch Jacob understood this trick of "points," and turned his knowledge to good account. Mr. Darwin, in his theory of natural selection and survival of the fittest, has demonstrated to the satisfaction of most minds that even different species have been created through an instinctive conformity to the principle of "points."

Consanguineous marriages offend our sense of what is right; and under the hap-hazard system, or rather lack of system, of marriage which obtains, should be discountenanced and prohibited by law. If another system, however, prevailed than that under which the very erratic passion called love existing between a young man and a young woman is a sufficient warrant for them to enter into relations through which they may legally procreate, the scientific objection to blood-relationship in parents would be removed in a large measure. Consanguineous marriage intensifies in the child tendencies common to the parents, and is operative for good as well as evil. In cases in which it has operated for good it receives no credit, but when perchance the condition existed through which it intensified a vicious predisposition, it is held up as a crime against nature and morality.

PHILADELPHIA MALARIA.—Med. and Surg. Reporter: The warm winter in this section keeps alive the malarial poison. According to the Delaware County Gazette, the prevalence of typho-malarial fever in and around Chester at the present time and for the past two months is really alarming. In some portions of the city it has almost reached an epidemic, fifty per cent of the people living in those localities being affected more or less by the disease. In many cases it has been as severe as typhoid fever, and in fact nearly all the cases had a decidedly typhoid aspect.

THE DOCTORS IN MEMPHIS DURING THE EPIDEMIC OF YELLOW FEVER.—N. Y. Med. Record: In 1878 all the homeopaths—four in number—ran away when the plague came. Of the forty-six regulars, ten followed in their wake. Of the thirty-six who remained, twenty-eight were attacked with the fever and fourteen died. Eight already had had the disease and were not attacked, although on duty day and night. This fact corroborates the belief that one attack gives immunity from a second.

THE INFLUENCE OF DIFFERENT POSITIONS OF THE BODY ON ITS TEMPERATURE.—This subject has been lately studied by Dr. Saszezky (*Petersburg. Med. Woch.*) His method of experimenting consisted in placing the patient upon his back, first with the arms folded on the trunk, and then with the same extended, the temperature being simultaneously measured in the ear, mouth, axilla, rectum, fists, and between the first and second toes. The pulse and respirations were noted at the same time. In other experiments the legs were raised instead of the arms, the patient lying on his back as before. The general conclusion arrived at was that elevation of the extremities, and especially of the legs, raises the temperature of the whole body, *except that of the part elevated*, some fraction of a degree, or even one or more degrees, centigrade. The effect is more marked in sick people than in the healthy. The pulse and respirations are accelerated in both by raising the limbs. The greatest rise of temperature is observed in the axilla and rectum. The effect of posture is most decidedly seen in typhoid patients, especially in cases where the fever has been severe and the nutrition of the heart is much impaired. Patients with true heart-disease come next; then those with phthisis. The explanation of these facts appears to be a simple one. The flow of warm blood to the elevated limb is diminished, and that to the other parts of the body increased; and the weaker the condition of the heart the more decided do the differences of temperature between the two regions become.—*Med. Times and Gazette.*

PREVENTION OF INFECTIOUS DISEASES.—*Medical Times and Gazette:* The Board of Health of the Canton of Zurich have just taken an important step with regard to the prevention of infectious diseases. They recently issued an order that every case of such disease, however slight, is to be reported direct to them, and for this purpose they have furnished every medical man in the district with books provided with counter-foils. Sanitary commissions, instituted with this object, will be obliged to send instructions to the medical men when the cases are considered serious, and will prescribe the means of disinfection, isolation of the sick, and other precautionary measures. The results of the information sent by the practitioners will be published every month under the direction of the Board of Health.

NEWSPAPER LAWS.—We call the special attention of postmasters and subscribers to the following synopsis of the newspaper laws:

1. A postmaster is required to give notice *by letter* (returning a paper does not answer the law) when a subscriber does not take his paper out of the office, and state the reasons for its not being taken. Any neglect to do so makes the postmaster *responsible* to the publishers for payment.
2. Any person who takes a paper from the post-office, whether directed to his name or another, or whether he has subscribed or not, is responsible for the pay.
3. If a person orders his paper discontinued, he must pay all arrearages, or the publisher may continue to send it until payment is made, and collect the whole amount, *whether it be taken from the office or not*. There can be no legal discontinuance until the payment is made.
4. If the subscriber orders his paper to be stopped at a certain time, and the publisher continues to send, the subscriber is bound to pay for it *if he takes it out of the post-office*. The law proceeds upon the ground that a man must pay for what he uses.
5. The courts have decided that refusing to take a newspaper and periodicals from the post-office, or removing and leaving them uncalled for, is *prima facie* evidence of intentional fraud.

AN ADVOCATE FOR FAST EATING.—Dr. J. F. Hibberd, in the St. Louis Journal, advances a number of reasons in favor of rapid eating rather than slow. He claims that in his experience those who "bolt" their food are the healthy members of society, while those who eat slowly and masticate thoroughly are always dyspeptic and sickly. His explanation is, that well-masticated food passes from the stomach almost immediately and before it has been acted on by the gastric juice, while large pieces of food are retained until softened and dissolved by the digestive process.—*Medical Record.*

[Is there any thing that some one does not believe?]

A SAD AND SUGGESTIVE PICTURE.—"I've been in twenty-four states and have seen a good many physicians," said a well-to-do physician who has made his pile, "and I don't understand why the most of them have such small practices. . . . But I discovered something that surprised me. I visited scores of physicians whose whole library I would have no difficulty in carrying off at once. One leading physician of a certain town did not have a bound book either in his office or house that I saw, only a few pamphlets and journals. Others that I met did not seem to be absorbed in their business. A man can not succeed unless his profession absorbs him."—*Exchange.*

IN the mortality report of Evansville, Ind., for 1879, published in the Indiana Medical Reporter, the following causes of death are enumerated: "Liver complaint, one; over-exertion by washing, two; diphtheria, one; nervous congestion, one; 'teases' pul., one; meetic fever, one; kicked by a bad man, one; chronic drea of head, one; chronic spinal disorder, four; by a ball and exposure, one; odontitis, one; krampyn, one; poisoned by a sting of a bug, one." And the Reporter remarks: "One of the reported still-born children is recorded to have lived ten hours."

ADMINISTRATION OF CASTOR OIL.—Med. Press and Circular: The following method of administering castor oil is recommended by M. Potain, and described in a late number of *Le Praticien*. An orange is cut in halves, and after removing the pips the juice of one half is pressed out into a tea-cup. The oil is poured carefully upon the top of this juice, and on this again the juice of the other half the orange is squeezed out. The oil remains between the two layers of juice in the shape of a meniscus, and may be swallowed without any unpleasant taste.

THE FROG-CURE.—Medical Press and Circular: In *De Tydschrift*, a Dutch journal published at the Cape, an old lady recapitulates a list of remedies with which she tried to cure some affection of the lungs. "I began," says she, "with ordinary plasters, then thorn plasters, then tar plasters, then Holloway's ointment, then Poor Man's Friend, pipe oil, Haarlem oil, and the 'lights of a young kid.' Failing to receive the least benefit, I next tried in succession wild dagga, blue gum, buchu, peaches, wild aloes, kruidje-roer-mijniet, and they failed. Then I tried one half of every thing in a big Huis Apotheek, and still failed to get cured. An old woman advised me to boil the entrails of a sheep and drink the water. I did so, but received no benefit. A 'Kanny Schot,' who said he was a doctor, tried carbolic acid and linseed meal; but it was the eight frogs in a muslin handkerchief that cured me."

THE Physician and Pharmacist is changed, in the January number, into the "Physician and Bulletin of the Medico-Legal Society, a monthly journal devoted to practical medicine and medical jurisprudence," and pharmacy will no longer find a place in its pages. We wish its editors—Drs. E. H. M. Sell, H. P. Gisborne, and Geo. W. Wells—success.

THE removal of all the external genital organs need not necessarily prove fatal, for we remember a case to the contrary. A boy while swimming in Falmouth Harbor was suddenly attacked by a large fish—possibly a young shark—which, rushing between his legs, bit away the penis and scrotum with its contents. This person recovered, being possibly aided thereto by the styptic action of the sea-water.—*Med. Press and Circular*.

SKIN-DISEASE.—The field of dermatology, to practitioner and student alike, is particularly fascinating and instructive. . . . Nowhere outside of this branch of medicine can results be so confidently predicted upon the scientific employment of therapeutical agents, and nowhere else does the proportion of satisfactory issues afford greater encouragement to the conscientious and painstaking observer.—*Dr. J. H. O'Reilly, U. S. Marine Hospital Service, in Ind. Med. Rep.*

FROZEN MEDICINES.—N. Y. Med. Record: It is asserted by Dr. Edwyn Andrew that many drugs may be given with superior advantage by first freezing them. Antiseptic, astringent, antiemetic, and nauseous medicines come under this head, and may be combined with ice without difficulty. An especially good feature of this plan is in its affording a possibility of the stomach's retaining medicines which it would reject if given in ordinary ways.

Selections.

Enteric Fever, Diarrhea, Diphtheria, and Scarletina Originating from Drinking-water. By Norman Kerr, M. D., F. L. S., London, in *British Medical Journal*:

I. A farmer's wife suffered from a typical attack of enteric fever with hemorrhage from the bowels, from which she made a perfect recovery. Diarrhea had previously never been absent for more than a fortnight at a time from the house. Either the father or the mother, or one or other of the four children, or one of the servants was the sufferer. Two children had been attacked with scarlatina, of which, and of the other ailments enumerated, there had been no case in the neighborhood for more than two months previously. Nearly the whole household had also repeatedly suffered from more or less severe sore throat, one child having diphtheritic patches on the tonsils on one occasion. By the method of exclusion I arrived at the conviction, after the milk supply had been changed with no benefit, that all the illnesses to which the family were so prone must arise from the water of the well used for drinking purposes. My opinion was not seriously listened to until the typhoid fever set in, when the alarming state of the

patient secured me at last a favorable hearing. The water formerly in use was given up and a new supply brought from another well about fifty yards off. The unhealthy symptoms ceased from the day of change. So marked was the improvement that in a month the farmer and the landlord (the latter's mansion being close by) at length consented to my long-urged request to clear out and examine the old well in the yard, the water of which they had formerly drunk. An old drain, which carried the liquid refuse from the pigsty and cattle-sheds, was found opening into the well, about five feet from the surface. After this outlet had been built up, and the drainage of the yard diverted into an adjoining water-course, the family once more resorted to the old well; and during the three years they remained at the farm there was no recurrence of any of the former symptoms. I ought to add that neither enteric fever nor any similar disease had affected the stock during the whole period of the illnesses referred to.

II. In the residence of the gentleman who owned the farm where so much illness arose from the use of contaminated water, and which was not more than a hundred and twenty yards from the farmhouse, sore throats, twice accompanied by diphtheritic patches, were seldom absent. Diarrhea was also a constant guest; but, though frequently of a typhoid type, it never passed into thoroughly-developed enteric fever. Every other source of poisoning having been eliminated by elaborate inquiry, I laid it down that the symptoms must arise from the pollution of the potable water. The aged head of the family, who, strange to say, was the only inmate who never suffered from any of the symptoms referred to, was of the old school, represented by a worthy and reverend friend of mine, who died from enteric fever, who did not believe in modern sanitation, and who was accustomed to boast that he had a cesspool so deep and so capacious that it needed cleaning out only once in every thirty years. My hale and venerable patient, firm in his belief that neither bad water nor bad smells ever hurt any one, had always ridiculed my interpretation of the cause of the constant unhealthy state of the household, and would never accede to the well and drains being examined. But the result of the inquiry into the sanitary state of the farm so convinced the rest of the family that a thorough inspection of the sanitary state of the house was instituted. The result was unmistakable. The well from which the supply of drinking-water had been taken was in the middle of the courtyard, which latter was traversed by four brick drains, one from each corner of the house, these drains converging into one large common drain at a point adjoining the well. Large leaks were found in all the drains, the leaks being caused by rats. The refuse from the drains had thus been freely soaking into the well. It only remains to add that since the defects were made good and the drainage no longer allowed to pour into the well the old diphtheritic and enteric symptoms have never reappeared.

III. Three sons of a gentleman farmer, aged respectively thirteen, eleven, and eight years, were simultaneously struck down by diphtheria. In spite of the most watchful care and nursing, all three died within ten days. No other member of the numerous family was attacked. There had been no diphtheria in the neighborhood, and none of the family had been where it was. The milk-supply was found blameless; so, unless it be contended that the poison was "in the air," there was no other possible solution than that

the drinking-water was at fault. The well lay in a hollow in the farmyard, and there was considerable leakage into it from the brick drains leading from the cowshed and pigsty through surrounding damp soil.

IV. In an old county family, the father, thirty-five years of age, was seized with diphtheritic sore throat and typhoid diarrhea; and the son, five years of age, with similar throat symptoms and extreme weakness. Both had suffered previously from repeated, though less severe, attacks of sore throat and diarrhea respectively. The milk was minutely examined, and found pure; but, opening into the well (behind the immense pile of buildings), from which the drinking-water for the establishment was drawn, were found leakages from seven different drains emerging from the house. As soon as proper sanitary measures were completed the family, who had all left, returned; the old well was used as before; and no ill consequences of the nature to which the father and son had formerly been subject thereafter overtook them.

Remarks. These are but a few cases, selected from a large number, where contaminated water seemed to be the originating cause of enteric fever, diarrhea, diphtheria, or scarlatina. I have seen, in one family at the same time, one member struck down by scarlatina, a second by diphtheria, a third by diarrhea, a fourth and a fifth by slight sore throat, and a sixth by erysipelas. In more than one instance of this kind the varied diseased conditions were all traced to the impure drinking-water. I have long been driven to the conclusion that the same contaminated drinking-water may, without the presence of specific germs, give rise to different diseases, the poison making itself manifest in the shape of erysipelas, scarlatina, diphtheria, diarrhea, or enteric fever. The source is the same, the poison is the same, but the physical state of the individual constitution, or some idiosyncrasy of susceptibility, or some differential surrounding condition, is the factor in determining the special form of ailment which the poison may assume in any particular case.

Child Poisoned by Lucifer Matches.—On the 27th of last month a distressing occurrence took place in Glasgow, which resulted in the death of a girl of four years (*British Med. Jour.*, January 17th). Unobserved by the parents, she obtained possession of a box of lucifer matches, with which she amused herself for some time. Shortly afterward she seemed indisposed; and though an examination of the box showed that the child had been sucking the phosphorus on the matches, not much was thought of the occurrence. As the child, however, grew worse, medical advice was obtained; but she gradually sank, and died early on the following morning.

Pilocarpin in Puerperal Eclampsia.—At a meeting of the Obstetrical Society of Philadelphia Dr. Whelen reports two cases of eclamptic convulsions treated by pilocarpin and free venesection, both cases recovering.—*Amer. Jour. of Obstet.*

Quinine in Ovariectomy.—Quinine as a preparatory and subsequent treatment in ovariectomy, as recommended by Dr. J. Williamson, of Ottumwa, Iowa, in the New York Medical Record, is a most salutary suggestion, and we heartily indorse it.

A case of reproduction of the membrana tympani is recorded by Dr. S. O. Richey, of Washington, in the *Amer. Jour. of the Med. Sciences*.

Chloral.—The following, from the Medical Times and Gazette, is an abstract of a report of the Chloral Committee of the London Clinical Society:

Seventy special replies and three printed papers had been received by the committee in reply to nearly a thousand circulars distributed throughout the profession, followed a few months later by a second appeal made public through the freely-accorded medium of the medical press. Twenty-nine answers state that after extensive experience of chloral, in long-continued doses, no ill effects have been observed. Ten of these correspondents enjoy the special opportunities for observation afforded by asylum practice, and Mr. Curgenvin, Dr. Theodore Williams, Dr. W. Squire, Dr. Buzzard, Dr. Clifford Allbutt, and others, furnish cases in which chloral had been regularly and beneficially taken for periods varying from two to ten years. Before proceeding to analyze the replies received from those who had observed inconvenient effects to follow the use of chloral, the committee have thought it well to draw up a brief summary of what has already been recorded on the subject. Their special information has been arranged under the various headings of the schedule, thus: *A. Nervous System.* Fourteen answers record cases in which nervous debility, mental enfeeblement, and convulsive seizures appeared to follow the use of chloral; Dr. Maudsley, Dr. Clouston, and Dr. Lindsay expressing themselves as strongly opposed to its employment in insanity. *B. Circulatory System.* Two answers under this heading note some cardiac enfeeblement. *C. Digestive System.* Six replies mention digestive disturbance as occasionally following the administration of chloral. *D. Cutaneous.* Nine correspondents give the details of cases in which they observed itching of skin, lichenous eruption, with deep flushing of face and head, following the taking of stimulants. *E.* Two replies indicate the possibility of urinary irritation being produced by chloral. Inquiry among some of the leading druggists of the metropolis has not established the probability that there is any remarkable abuse by the public of the facilities which they enjoy of purchasing for themselves any quantity of chloral. The drug, it may be mentioned, is not included by the legislature among those the sale of which is guarded by the name and address of the purchaser being required to be registered by the vendor. In conclusion, the committee wish to express their regret that in spite of repeated appeals to individuals personally and to the profession by circular and through the medical press, they have failed to obtain any more definite information than that contained in the preceding report; and though the opinions expressed by numerous gentlemen of experience will doubtless be received with the respect which is their due, the committee would have been glad if more facts from which definite conclusions might have been drawn had been placed at their disposal.

The committee was an exceptionally strong one. Certain questions were framed, and nearly one thousand copies were circulated among members of the profession. But only seventy-three replies were returned, notwithstanding a second appeal made through the medium of the medical press. Such a barren result exhibits one of two things—either a profound want of interest in the subject on the part of the profession, or a condition of general contentment with the drug as commonly used. Our own impression is that such committees and such circulars are pretty well played out. We do not remember,

during the space of many years, a single report on which we could place our finger with unqualified approbation. In nearly all of them the number of facts given are too few for the statistical method to be employed with any certainty or satisfaction, and often the replies are of the most viewy and sketchy nature. In one of the most recent of these—the Medico-chirurgical Report on Croup and Diphtheria—this was most characteristic, for, if memory fails not, there was not a single reply from one who had seen a real epidemic of diphtheria, where young and old were alike attacked; nearly all the really reliable information coming from children's hospitals.

How to Cure Fits of Sneezing.—John Martin, L.K.Q.C.P.I., L.R.C.S.I., writes to the British Medical Journal: In the issue of the British Medical Journal of December 27, 1879, the above heading having attracted my attention I was very much interested to find the course of procedure recommended agrees to a certain extent, the principle being the same, with the practice I have adopted for years. Since my schoolboy days I have known that if the nostril of the affected side be stopped early enough, as by pressure with the finger on the ala nasi, there will be no sneeze. During more recent years, when I have been suffering from irritation of my Schneiderian membrane so as to annoy me, I have selected out and placed a good "chamomile flower" in each nostril. I find that it not only acts as a respirator, but the flower gives off a very grateful aroma, which I consider beneficial from its soothing influence. These flowers are inexpensive, and can be obtained of all sizes. They will be found, I believe, very useful if placed lightly within the nostril. Although I have practiced this little idea for some time I did not consider it worthy of recording till I observed the communication of Mr. S. M. Bradley in this journal. I may add that during the past autumn I was much annoyed with continuous irritation of my Schneiderian membrane, to which the foregoing only gave temporary relief. After trying many things, I bet thought myself of trying extract of belladonna; the small dose of half a grain of this drug produces its toxic effects on me, drying up the secretions of my feces, etc. Although it is now more than two months since I took my dose I continue free from any thing unusual in this way. I may say that the irritation complained of did not amount to sneezing, but to a raw sensation on inhalation, which I found was very annoying. I was, therefore, very much pleased when I found that the irritation produced by my dose terminated in complete resolution. Should these hints be of any benefit to mankind I will be more than compensated.

The Time of Predilection in Pregnancy.—Dr. Paul F. Mundé says: In all maternity hospitals in Germany, as in private practice among the laboring classes, the period of nine months after any large country fair, or secular or clerical holiday, is inevitably marked by an unusual number of confinements. I had abundant opportunity of making this observation during my service in the Maternity at Würzburg.

Gall-stones.—Dr. Buckler (Boston Med. Jour.) places the utmost confidence in chloroform to dissolve gall-stones. He gives fifteen to twenty drops or more every three or four hours, to accomplish solution within ten days. In all cases he uses the succinate of iron, half a teaspoonful after each meal.

Picrotoxine and Its Properties.—Extract from British Medical Journal:

Picrotoxine is the active principle of *cocculus Indicus*, a plant which has been recognized as a medicine since the days of the Arabian physicians, by whom it was described by the name of *maheradsch*. It is curious that, although *cocculus Indicus* possesses such powerful and valuable properties, it has in modern times found little favor as a medicinal agent; and we can not help thinking that its general abandonment as a remedy was a singularly unwise step. It is a valuable local application for certain forms of skin-disease. In the east it has been long used in the form of a powder applied externally for the destruction of vermin on the skin as well as for the cure of scabies, and, in the form of ointment, it is said by Christison to be one of the best applications for the treatment of ringworm of the scalp. Speaking of the ointment of the old Edinburgh Pharmacopeia, he says that, although it may occasionally fail to cure the eruption, it always does good by relieving accompanying irritation. Undoubtedly a picrotoxine ointment, made with vaseline or some similar substance, would prove a welcome addition to the armament of the dermatologist. *Cocculus Indicus* also possesses great value as a medicine for internal administration. A few years ago, M. Felix Planat recommended it as a good remedy for epilepsy, not as a specific but as a truly useful drug. The sole exceptions recognized by him to its curative powers in this affection are inveterate cases, whether idiopathic or symptomatic. He employs a tincture made by macerating for three weeks two hundred grams of *cocculus Indicus* in one thousand grams of alcohol. Of this, he begins by giving two drops twice a day, and then each successive day increases each dose by one drop until thirty drops a day are being taken. He then gradually reduces the quantity a drop at a time until the original dose is reached, when the treatment is suspended for a fortnight; after which it is renewed, and again intermitted alternately during six months. These directions certainly seem somewhat fanciful, but M. Planat was able to produce sixteen cases of cured epilepsy—the best criterion of the value of his treatment. His observations attracted much attention at the time; and the Paris Academy of Medicine showed their appreciation of his meritorious work, extending over a period of twelve years, by awarding him a prize of five hundred francs. Picrotoxine is surely worthy of a trial in obstinate cases, especially when the attacks occur chiefly at night. For chorea it is recommended by no less an authority than Gubler; and, according to Tschudi and others, it is especially useful in paralysis of the sphincters. It is also employed in various forms of dyspepsia, notably when there is severe epigastric pain aggravated by pressure or by taking food. Dr. Phillips speaks of it as being of singular service when the colon is distended with flatus, and when the bowels are constipated and the motions hard and lumpy. He also recommends it for certain symptoms associated with irregular menstruation. In females of nervous temperament and of thin and delicate fabric of body, the menses are often preceded by paroxysms of colic felt in the hypogastric region, and accompanied by more or less pain in the back and hips. This pain not only precedes the appearance of the catamenia at each period, but accompanies them for the first day or two. They are of a twisting, griping, or colicky character, and are attended by a scanty discharge or a profuse one, in either case somewhat paler than usual, and mixed

with clots and shreds of membrane. The administration of two or three drops of a saturated tincture of *cocculus* three or four times a day prior to the expected flow, and continued during the first two or three days of its progress will frequently ward off the pains and render the discharge more natural.

Quite recently, Dr. Murrell has introduced picrotoxine as a remedy for the night-sweating of phthisis. He uses a one in two-hundred-and-forty solution in water, and of this he gives from one to four minims three times a day, the last dose being taken at bedtime, or immediately before the time at which the perspiration usually commences. He has employed this mode of treatment at the Royal Hospital for Diseases of the Chest in twenty cases, with only one failure. The sweating is usually arrested in two or three days, and there was no return for a fortnight or more. The picrotoxine is best given alone, and not in a mixture, and it has been found to succeed after oxide of zinc, belladonna, Dover's powder, and other remedies have failed. The advantage of the treatment is that it does not make the skin too dry, but leaves it comfortably moist, while not unfrequently atropia seems to parch it up. The aqueous solution is apt to deposit crystals in winter, but it soon clears up on warming.

Three Cases of Ruptured Kidney.—Lancet, January 17th:

The first case was a man, aged thirty, who was found dead. From the position in which the body was found, and the circumstances connected with the death, it was concluded that the deceased, in a state of intoxication, had been thrown with violence against an iron railing. On laying open the abdomen there was found a large quantity of blood, fluid and clotted. Upon the removal of the blood the right kidney was seen flattened and lacerated throughout its entire extent; the rents in its structure numerous and deep. There was blood extravasated in the tissue behind the peritoneum. There was no blood in the bladder, and there was no injury to liver or other organ in abdominal cavity. The lungs were pale and bloodless. Death had taken place from shock and hemorrhage.

The second case was a boy who was struck on the side by a sack of flour, knocking him down. He lived two hours. The left kidney was lacerated, but the pieces were not entirely separate, although they were much flattened and torn. There was blood effused in large quantity both behind and in front of the peritoneum. No other organ injured.

The third case survived sixty hours after the injuries. A man, in a street row, had been kicked violently on the side. After the injury, though suffering much pain in his side, he walked home, about a mile. There was blood in his urine. His sufferings were great, the pains deep in his belly corresponding with the situation of the kidney, and soon there set up symptoms of general peritonitis. There was evidence of bruising on the left side, and abrasion of the skin. On post-mortem examination there was in the abdomen much serous fluid, large clots of blood, and evidence of acute peritonitis. The left kidney was torn almost completely through at the hilum, and some urine had been escaping.

For Urticaria.—Where quinine (preceded by an emetic and purgatives, if necessary) fails to cure urticaria, salicylic acid and salicylate of soda are likely to succeed.

Abnormally High Temperatures.—Mr. John W. Teale, F. R. C. S., whose statements have been doubted by some persons, thus forcibly writes, in the *British Medical Journal*:

The entire omission of any reference to my case in Dr. Donkin's recent paper (*British Med. Journal*, December 20, 1879) upon abnormally high temperatures (an omission which, Dr. Donkin informs me, was due to the amount of skepticism he found among scientific men in London as to its reliability) induces me to ask that I may be allowed to draw attention to some of the leading features of the case, and to draw some conclusions thereon.

In February, 1875, I brought before the Clinical Society the particulars of a remarkable case which had occurred in my practice. A young lady, having received serious spinal injuries from a fall from horseback, had for sixty days a temperature ranging from 108° F. to 122° F. and upward, and eventually recovered. . . . A great variety of instruments were used by me, seven in all, exclusive of the one used by my brother, Mr. T. Pridgin Teale, who saw the case three times with me in consultation. Most of these afterward received the Kew certificate of accuracy, and all were supplied by Harvey and Reynolds, of Leeds. . . .

In July of the same year (1875) I wrote in the *Journal* a letter replying to various questions and skeptical criticisms on this extraordinary and at that time unique case; and I was able, owing to my patient having had a relapse under the care of another medical man, to give that gentleman's experience of her high temperature. This gentleman—Mr. Hind, of Stockton—told me afterward that on one occasion the heat in the axilla was so great that the mercury burst the tube at the top of the instrument, the index being found in the broken-off air-space at the top.

This, so far as I knew, was the first case published bearing on these abnormally high temperatures. It was the first which seriously challenged the then accepted view of physiologists, that such temperatures were incompatible with human life. . . . As time went on, first one case and then another was published in the medical journals, all proving the occasional occurrence of temperatures usually considered fatal in persons who not only recovered, but who at the time of the excessive temperatures did not appear to be in imminent danger of dying. This series culminated in that of Dr. Roddick, of Montreal, with a recorded temperature of 117° F., in which the mercury was lost in the bulb at the top of the thermometer. The temperature reached 117° F., but how much higher it might have gone can not be known, as the instrument could not record it.

I claim Dr. Donkin's interesting series of cases as a strong corroboration of the truthfulness of mine. The following points seem now to be clearly established: 1. Temperatures above the degree formerly supposed to be necessarily fatal do sometimes occur without a fatal issue; nay, even without extreme peril to life. 2. Such exceptional and excessive temperatures as a rule end in recovery. 3. The conditions of body in these cases of excessive temperature appear to be distinct from the conditions existing in fevers, in which the rule as to the extreme peril in temperatures of 107° and upward remains unassailed.

What the explanation of these rare and exceptional cases may be it is for physiologists to work out; but it can never be settled if they shut their eyes to facts which contradict their theories, and relegate such cases to oblivion.

Cystic Kidney Removed by Operation.—Dr. Day exhibited, at a late meeting of the Pathological Society of London, this specimen, which had been removed by Mr. Knowsley Thornton from the left side of a girl aged seven years. The patient presented a large, irregular abdominal tumor, the nature of which was doubtful. A swelling had been observed since the girl was two years of age, but she had not suffered from pain or discomfort. Her urine had been rather scanty, but contained no albumen. Last November an exploratory puncture was made into a part of the tumor between the umbilicus and pubes, where fluctuation was felt. Urinous fluid, which contained albumen, was drawn off to the amount of six pints and a half. The cyst rapidly refilled, and on January 3d it was removed by Mr. Thornton, and found to be connected with the left kidney. The ureter was impervious, so that there was danger of the distended cyst bursting. Since the operation the patient had gone on remarkably well.

Enormous Calculus.—*Boston Med. and Surg. Journal*: A urinary calculus, weighing one pound six ounces avoirdupois, was lately removed by Dr. Hodgen, of St. Louis. The stone was spherical, and measured eleven and a half inches in circumference and four inches in diameter. The removal was by the supra-pubic operation, and the calculus was necessarily broken. The patient was sixty-two years of age, and up to within a few days had been in the habit of walking from two to four miles daily. Fifteen years ago he had two stones removed from his bladder by Dr. Pope, and from that time has enjoyed remarkably good health, except some vesical irritation, and, during the last two years, incontinence of urine. Before the operation the stone could be distinctly felt as a hard tumor in the hypogastrium. The stone is composed chiefly of phosphates.

Bad Egg.—*Medical Times and Gazette*: A novel and dangerous method of adulteration has recently been discovered in Paris. The scarcity of eggs has led some confectioners to endeavor to deceive their customers by using neutral chromate of lead to give their pastry a yellow tinge. M. Personne has exhibited to the Academy of Medicine some pastry seized by the police, the over-coloring of which attracted attention, and he warns the public to be upon their guard against this poisonous ingredient, from which several persons have already suffered.

Chloral was discovered by the French chemist Balard, in the year 1844; but its physiological effects were not determined till 1859, by Guthrie. Special attention was not called to it until 1865, when Dr. Richardson, of London, first introduced it to the profession as a therapeutic agent. It is prepared by heating one part of strong nitric acid with two parts of rectified fusel oil, taking care to collect only that part of the distillate which passes over between 202° F. and 206° F.—*Dr. Reed, in the Detroit Lancet.*

Color-blindness.—Our contemporary *Iron observes* (*Lancet*), with some degree of truth, that inability to distinguish varieties and shades of color where it exists probably depends more frequently on ignorance than upon physical imperfection; and says that the only work on color nomenclature has been long out of print, and is now comparatively seldom to be met with.

Therapeutic Effects of Lightning on Cancer. A. Allison, M. D., Senior Surgeon to Lloyd Cottage Hospital, Bridlington, writes to the *Lancet*:

As I am not aware that the records of the healing art furnish any case of cancer having yielded to the influence of lightning I venture to draw the attention of the numerous readers of the *Lancet* to the following remarkable case, which may awaken due interest in the curative value of electricity in diseases of a malignant type. Many years ago I heard the late Dr. Golding-Bird express an opinion to the effect that electrical sparks drawn from a cancerous structure till an eruption is produced was the only reliable means of cure which he could indorse. In confirmation of the theory of the celebrated electrician, I beg to submit an extraordinary instance of the therapeutic freaks of atmospheric electricity in the cure of cancer. The case loses none of its interest on the plea of antiquity.

About thirty years ago I attended Reuben S., a farm laborer, residing at Langtoft, on the Yorkshire Wolds, who suffered from cancer of the inferior lip and part of the chin for about a year, and who had agreed to an operation for their removal. In the meantime he undertook to assist a poor farmer for a day in plowing his land. During this occupation he was struck down by lightning and carried home in a state of insensibility. Both of his horses were killed, and the wooden beam of the plow was split and reduced to considerable fragments. Soon after the occurrence I visited, and found the plowman in a state of great prostration, and emitting a strong odor of ozone, indicating electrical condensation of the adherent oxygen. As soon as reaction took place I bled him from the arm, which act constituted the whole of the treatment. What seems to be the most astonishing feature in the case is the healing process which was set up in the lip and chin soon after the accident. The cancer gradually lessened, and in a few weeks every trace of the diseased structure disappeared, and for ten years he enjoyed complete freedom from his former suffering and signs of the disease. In proof of the specific and hereditary character of the disorder I may state that the patient's granddaughter, Mrs. P., of Driffild, lately became the subject of a cancerous tumor over the larynx, which growth, assisted by Dr. Eames, I removed successfully a few weeks ago, and under the persistent use of arsenical treatment the cure seems to be satisfactory. In S.'s case the electrical fluid seemed to form and pass through two small holes in the head-band of his trowsers, and to make its exit by corresponding apertures. After this remarkable exemption from all cancerous development for so long a period, the disease reappeared, and after a year of intense suffering proved fatal, still leaving the inference unaffected that the imponderable element secured for the patient an extension of life and ten years' relief from the distressing consequences of carcinoma, which circumstance establishes my faith in the therapeutic power of electricity in scirrhus indurations.

From the foregoing representation it is evident that frictional electricity may in good hands become one of the most powerful therapeutic agents in the dispersion of cancerous formations. When cellular hypertrophy takes place in localities favorable to the development of epithelial disease, frictional electricity might be employed for the purpose of destroying the morbid cells, whether in their incipient or advanced stages of progression. The authorities of the London Cancer Hospital will be unfaithful to their honorable

trust should they decline to test to the fullest extent the curative effects of frictional electricity in some of the most hopeless variety of diseases to which humanity is exposed.

Tight Lacing.—Med. Press and Circular: There can be small doubt that the great majority of women submit themselves to a waist compression that exerts a very injurious influence on their health; and it is by no means improbable that the greatly-increasing numbers of sufferers from the heterogenous class of ailments termed "diseases of women" are augmented chiefly in consequence of the unnatural distortion to which women submit themselves in pursuit of the phantom "fashion." The importance of giving due consideration to this practice, and the evil effects following from it, are insisted upon by Dr. Dyce Duckworth, in the January number of the *Practitioner*. Dr. Duckworth does not incline to think that the ill consequences of the practice are likely to be so severe in the future as they have been in the past, but in this he may be possibly mistaken. The changes which have been made in the shape of the corset within the last ten or twelve years, by the introduction of a form of stay termed the "spoon-busk," and which exerts pressure directly on the lower portions of the abdomen, have, we venture to believe, been largely to blame for the great prevalence of uterine displacements, the frequency of which among young people of the better classes has been more than once commented upon by practitioners. It will be well if the profession take the advice given by Dr. Duckworth, and give increased heed to the possible consequences of a "fashionable attire."

Female Castration.—Professor Hegar read the results of forty-two operations made by himself for various diseases, with seven deaths and but a few absolute cures. Dr. P. F. Mundé says: Adding to fifty-one previously-reported cases, with sixteen deaths, these forty-two of Hegar, with seven deaths; sixteen by Freund, Schroeder, Langenbeck, Martin, Müller, and Czerny, with but two deaths (see below); ten by Noeggerath (unpublished), two deaths; one by Goodell, fatal (see *Phil. Trans.* in this number), and one by Battey, recovery (unpublished), we have one hundred and twenty cases of Battey's operation, with twenty-eight deaths, or 22.6 mortality. If the positive benefits of the operation were as assured as its rate of recovery, the opposition to it would soon cease. —*Abstract from Transactions of the German Gynecological Society, in Amer. Jour. of Obstet.*

Treatment of Post-nasal Catarrh.—Dr. Joseph Rogers writes to the *British Medical Journal*: In the *London Medical Record*, which frequently contains useful hints for the general practitioner, I saw lately a formula for the treatment of post-nasal catarrh. It was, I believe, originally suggested by Dr. Duffin. It consists of oxide of bismuth, powdered gum acacia, and a small quantity of muriate of morphia. This should be well mixed, and then, if used as a snuff in severe coryza or post-nasal catarrh, it acts in a most charming manner. Cases of great severity and long duration have yielded to it after three or four days.

"Speciality" is an ugly word altogether, and smells rather too strongly of quackery. New "speciality" is but old "nostrum" writ large and translated out of dog Latin into slang French.—*7 Holmes, St. George's Hospital Reports, 1877-8.*